

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Baker <i>et al.</i>)	
)	Group Art Unit: 1734
Application No.: 10/086,985)	
)	Examiner: Lazor, Michelle A.
Filed: February 28, 2002)	
)	Confirmation No.: 6315
For: "SYSTEM AND METHOD OF COATING)	
PRINT MEDIA IN AN INKJET PRINTER")	

TRANSMITTAL LETTER


MAIL STOP AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

NEEDLE & ROSENBERG, P.C.
Customer No. 23859

Sir:

Transmitted herewith are the following in the above-identified application:

- | | | | |
|-------------------------------------|----------------------------|-------------------------------------|--------------------------|
| <input checked="" type="checkbox"/> | Amendment | <input type="checkbox"/> | Petition to Extend Time |
| <input type="checkbox"/> | Fee as calculated below | <input type="checkbox"/> | Supplemental Declaration |
| <input checked="" type="checkbox"/> | No Additional Fee Required | <input type="checkbox"/> | Terminal Disclaimer |
| <input type="checkbox"/> | Corrected Drawings | <input checked="" type="checkbox"/> | Other: Return Postcard. |

CLAIMS AS AMENDED							
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA	RATE	ADDITIONAL FEE	
Total Claims	20	46	0		X \$50.00	\$	
Independent Claims	2	8	0		X \$200.00	\$	
<input type="checkbox"/> First Presentation of a Multiple Dependent Claim					+ \$360.00	\$	
EXTENSION FEE	1 st Month \$120 <input type="checkbox"/>	2 nd Month \$450 <input type="checkbox"/>	3 rd Month \$1020 <input type="checkbox"/>	4 th Month \$1590 <input type="checkbox"/>	5 th Month \$2160 <input type="checkbox"/>		\$
<input type="checkbox"/> Reduction by ½ for filing by SMALL ENTITY (Note 37 C.F.R. §1.9, §1.27, §1.28) -							- \$
Total Fee Due							\$0.00

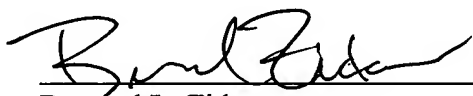
ATTORNEY DOCKET NO. 2001-0451.00/12016.0047U1
PATENT

Payment:

- ☐ A check in the amount of \$_____ is enclosed.
- ☐ Payment by credit card in the amount of \$**** for the fees designated below. (Form PTO-2038 enclosed).
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.
- ☐ The Commissioner is authorized to charge our Deposit Account No. 14-0629 in the amount of \$_____ to cover the above-listed additional fees. A duplicate copy of this transmittal is enclosed.
- ☒ In the event of an overpayment or improper payment of a required fee, the Commissioner is authorized to charge or credit our Deposit Account No. 14-0629 as required to correct the error.

Respectfully submitted,

NEEDLE & ROSENBERG, P.C.

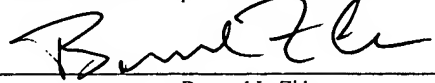


Bernard L. Zidar
Registration No. 48,620

NEEDLE & ROSENBERG, P.C.
Customer No. 23859
678-420-9300
678-420-9301 (fax)

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.



Bernard L. Zidar



Date



ATTORNEY DOCKET NO. 2001-0451.00/12016.0047U1
PATENT

AF/1734
EFW

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AMENDMENT

MAIL STOP AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

NEEDLE & ROSENBERG, P.C.
Customer No. 23859

Sir:

In response to the Examiner's Final Action mailed November 22, 2004, please amend this application as follows.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this Amendment.

Remarks begin on page 6 of this Amendment.